DISSERTATION

ON THE EFFICACY OF A

NEW METHOD OF PREPARING

FOR THE CURE OF THE

VENEREAL DISEASE,

IN ITS MOST MALIGNANT FORM.

Which IMMEDIATELY [illegible] the Gonorrhœa by [illegible] in which the Cure is obtained [illegible]

WITH

Observations on the [illegible] Infection.

BY JOHN WASTELL, SURGEON,

OF THE [illegible]

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[illegible]

TO THE

SURGEONS

OF

HIS MAJESTY's NAVY AND ARMY.

GENTLEMEN,

WHEN the obvious tendency of any work is, in its nature, ſalutary to mankind, the private object of the Author, in giving it to the public, is a conſideration of little conſequence.

Encouraged by that intimate knowledge of the excellent qualifications of many of thoſe Gentlemen, whoſe patro-

patronage he has taken the liberty to ſolicit, which the honour of many years ſervice amongſt them, has enabled him to acquire, he is induced to dedicate to them the following Treatiſe, not doubting, that whatever tends to alleviate the ſufferings, and reſtore the health of mankind, cannot fail to receive the protection and patronage, of ſo uſeful, ſo liberal, and ſo reſpectable a body, as the Surgeons of the Army and Navy.

The AUTHOR.

LONDON, FEB. 11, 1779.

[redacted]

Bostock Street
Old Gravel Lane
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INTRODUCTION.

THERE are few complaints, to which the human frame is liable, that are more deſerving of medical attention, than the venereal diſeaſe; and fewer ſtill, perhaps, in which the improvements of medical reſearches have been leſs adequate to the importance of the object, in affording a ſafe, ſpeedy, and efficacious cure for thoſe perſons, labouring under any ſtage of ſo contagious a malady.

To attain a perfect cure, even in an early period of this complaint, two, three, or even ſix months have ſometimes been found neceſſary; during which time, the patient has unremittedly ſuffered the moſt

moſt painful ſenſations; although I am *now* convinced, that from a proper and judicious treatment, every ſpecies of the diſorder may be cured in a much leſs time. The venereal gonorrhœa, for inſtance, in its *moſt virulent* ſtate, may be effectually eradicated in *a few weeks*; and when it is *recent*, may generally be cured in *ten* or *twelve* days.

Experience has fully proved, that the fatal conſequences of the neglect, or improper treatment of a gonorrhœa, are excreſcences, cicatrices, and ſtrictures, with painful ſwellings in the urethra, cauſing obſtructions of urine, and ſeminal emiſſions, which frequently terminate in a confirmed *lues* or *pox*.

Nor does the evil ſtop even there: upwards of thirty thouſand perſons are, by computation,

computation, ſuppoſed to be carried off every year in this iſland, by a conſumption, which diſorder is deemed endemial and peculiar to this country, and generally attributed to the inſtability and coldneſs of the climate, joined to its moiſture; yet it is an uncontrovertible truth, that a conſiderable ſource of ſo dreadful a mortality originates from the various ſucceſſive degrees of *venereal infection*. For we have too many inſtances, when the venereal poiſon has once infected the circulating fluids, that it attacks the glands of the viſcera, whence a hectical diſpoſition, nervous atrophy, and waſting of the fleſh enſue, until at length the body is totally emaciated, when death cloſes the ſcene.

Theſe are the fatal conſequences of a GONORRHOEA, or Clap unleſs PERFECTLY and TIMELY CURED.

It is well known, that no method hitherto offered to the public, can, with certainty, remove that painful and diſagreeable ſymptom in a *recent gonorrhœa*, viz. the *heat of urine*, until the original complaint is nearly ſubdued. The author, however, has fortunately, diſcovered a preparation, which *effectually*, and *without the leaſt danger*, relieves that acute pain; and when it is combined with that active and ſubtile mercurial preparation, which He has ſo particularly recommended in the following ſheets, radically cures the diſeaſe. A diſcovery, which, he flatters himſelf, will not fail of becoming extenſively uſeful, by not only co-operating in the prevention of the alarming conſequences already mentioned, but alſo by procuring that IMMEDIATE EASE, which has been ſought after for ſo many years, with ſo little effect.

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OBSERVATIONS

ON THE

VENEREAL DISEASE.

SECTION I.

THE Venereal Diſeaſe is properly diſtinguiſhed into local and univerſal.

In the former, the venereal virus is confined to ſome particular part of the body.

In the latter, the infection is carried into the blood, by means of the abſorbent veſſels, viz. the lymphatics, and circulating with it through every part of the body, mixes with the ſeveral ſecretions, and infects the whole habit.

As it is the former of theſe we ſhall firſt ſpeak of, I think it not amiſs to give a brief deſcription of the parts moſt liable to be affected, whilſt it remains local, to enable the reader (though not a medical man) to have a better idea of the ſubject. Being convinced that the ſucceſsful treatment of local diſeaſes, chiefly depends on

the knowledge of the particular ſtructure and uſe of the parts affected.

This deſcription is laid down in the moſt ſimple manner poſſible, every unneceſſary technical term is carefully avoided, and the whole calculated to ſerve the loweſt capacity, as well as thoſe whoſe education has been more liberal. An attempt, which to the author's knowledge has not yet been made, though the extreme neceſſity of it, to thoſe who would judge of the progreſs of the cure, is too manifeſt to need any comments to enhance its propriety.

SECTION II.

The Male Organs of Generation.

The teſtes or teſticles are two glands appropriated to the ſecretion of the ſemen from the blood. They are ſuſpended in a bag called the ſcrotum, into which they deſcend one or two months previous to the birth of the child.

The blood is carried to the teſticles, by the two ſpermatic arteries which ariſe (moſt commonly) from the anterior part of the aorta, one on each ſide, a little below the emulgents,

emulgents, and after the ſeminal ſecretion is performed, the blood returns back into the general maſs, by the ſpermatic veins. That on the right ſide commonly enters the trunk of the vena cava, lying on the left ſide of the aorta; and that on the left ſide goes to the left emulgent vein, taking the ſame courſe, as the left ſpermatic artery.

The artery and vein on each ſide, in their courſe downwards, tend towards the groin, not in a direct courſe, but a little about, to avoid being interrupted by the motion of the inteſtines. There is a great variety in the manner they ariſe from the great veſſels. They are connected to the fixed parts, by cellular membrane, and paſs *under* the peritoneum, through the ring of the external oblique muſcle into the groin, following nearly the ſweep of the rim of the pelvis: juſt as they pierce the tendon of the oblique muſcle, they join the vas deferens, and underneath the tendon, the ſpermatic veſſels have other parts united with them, when the whole takes the name of the ſpermatic chord.

The ſpermatic chord conſiſts of artery, vein, vas deferens, and cremaſter muſcle,

with

with nervous filaments and lymphatic veſſels, and paſſes down by the ſuperior projecting part of the os pubis, juſt over the interior end of Poupart's ligament, and enters the teſticle at its poſterior ſide, where it is connected with the tunica vaginalis.

The cremaſter muſcle is made of ſome of the fibres of the obliquus *internus*, that come from the ſpine of the ilium; it inveſts the whole ſpermatic chord, and goes with it through the ring to the teſticles. This muſcle aſſiſts in ſuſpending the teſticles in the ſcrotum, and ſpreads its fibres over the body of the gland, by its action it draws the teſticles upwards, towards the pubes: the chord has alſo a thin faſcia from the outer part of the tendon of the *external* oblique muſcle. Old authors ſay there is a ſheath proper to the chord and teſticles, called by them, tunica vaginalis communis, but the ſpermatic chord has *no* vaginal coats, it is connected to the ſcrotum by cellular membrane *only*. But to the *teſticle*, there belongs a bag, or coat, called tunica vaginalis propria; this bag is looſe from the teſticles every where, except on its poſterior part, where it is connected with it

its

its whole length. In this bag the water of a hydrocele is lodged, and obſcures the teſticle, except at its back part, where it may be felt by the finger.

The tunica vaginalis, is originally peritonæum, as is evident in the fœtus, where it is reflected over the teſticle, and forms its outer coat called tunica albuginea, ſo that the water of a hydrocele can touch nothing but this membrane.

The ſcrotum may be conſidered as an elongation of the ſkin, and cellular membrane of the penis, as by inflating the one, we inflate the other; on its outſide, it has a ſeam, or middle line, called the raphe, which is continued from the underſide of the penis, and *internally*, this bag is divided by a partition, compoſed of a *firm* cellular membrane, called the ſeptum ſcroti, being the duplicature of the internal cellular coat called dartos, which authors have deſcribed as a muſcle, but without any reaſon, there being nothing like a muſcular fibre to be ſeen in it.

The teſticle is an oblong flattiſh body, one end is ſituated upwards and forwards, the other downward and backwards; and,

at

at its upper edge, has an appendix called epididymis.

The ſubſtance of the teſticle is vaſcular, being chiefly formed from the convolutions of the ſpermatic artery, which here ſecretes the ſemen; it is incloſed in a ſtrong tendinous coat or covering, called tunica albuginea, which is cloſely united with it, though a ſmall force will ſeparate them. It is owing to the great ſtrength and compact texture of this membrane, that the intolerable pain of a bruiſed teſticle ariſes: ſwellings and injured parts being more or leſs painful in proportion, as they are diſtended with more or leſs difficulty. Beſides the ſpermatic artery and vein, which compoſe this glandular body, there are ſeveral lymphatic veſſels, and branches of nerves, and the ſemen is ſecreted through a number of ſmall curling threads, called vaſa efferentia, or tubuli ſeminiferi, which make a ſurpriſing number of convolutions, and form the epididymis.

The epididymis which is ſituated on the poſterior part of the teſticle, and *outſide* of the chord, is attached to the teſticle by the veſſels before mentioned, and likewiſe at both

both its extremities, by the duplicature of the tunica albuginea, which having ſupplied the place of a ligament, afterwards inveſts it. The poſterior extremity of the epididymis is incurvated from behind, and runs up to form an excretory duct called the vas deferens. The tubuli are the ſecretory veſſels that carry the ſemen, and though we cannot trace them into the vas deferens, yet the vas deferens may be traced into thoſe tubes.

The vas deferens is the canal or duct which conveys the ſemen from the teſticle to the penis. It aſcends with the ſpermatic veſſels towards the abdomen, until it gets as high as the ſuperior edge of the pubis, when it ſeparates from theſe veſſels, and paſſing down with the peritoneum, proceeds to the inferior part of the neck of the bladder, where it depoſits the ſemen in the veſiculæ ſeminales. It is very thick externally without the abdomen, and may eaſily be diſtinguiſhed in the ſpermatic chord by the finger. If quickſilver is poured into it, it deſcends to the lower end of the teſticle, which ſhews that the epididymis is a continuation of this tube.

The

The veſiculæ ſeminales are two white ſubſtances reſembling the circumvolutions of the inteſtines of a ſmall bird: they are ſituated between the rectum and lower part of the bladder, and are ſuppoſed to ſerve as the reſervoir of the ſemen, until it is wanted in the act of coition. There are two ſmall tubes formed by the extremities of the vaſa deferentia and veſiculæ ſeminales, which enter the canal of the urethra obliquely on each ſide. The verumontanum, or caput gallinaginis, which is a ſmall oblong eminence, ſuppoſed to be like the head of a woodcock, ſeems to act as a ſphincter to theſe two ducts. Theſe tubes or ducts enter the urethra at the baſis of the proſtate gland, which reſembles a ſmall heart, and is ſituated cloſe to the bladder, between it and the bulb of the urethra, having its baſis towards the bladder, and the apex or point towards the urethra.

The penis is compoſed of *cellular* ſpongy ſubſtances, called the corpora cavernoſa penis, and the corpus ſpongioſum urethræ.

The corpora cavernoſa, which conſtitute the

the greateſt part of the penis, form nearly two cylindrical tubes, the cavity of which is entirely filled up by a ſtrong cavernous ſubſtance, the cells of which communicate with each other. They lie cloſe together for the greateſt part of their length; but behind they ſeparate under the pubis, and are fixed, one on each ſide, to the inferior part of the os pubis, making what is called the crura penis: at their extremity they terminate in a point, where they are covered by the glans penis. The partition betwixt each tube is called the pecten, and for near two thirds of its length, neareſt the glans, it is perforated into interſtices like a comb, through which theſe cavernous bodies communicate; but in the other third part there are no *perceptible* interſtices or perforations. Being united laterally to each other for the greateſt part of their length, two groves are formed, one on the upper, the other on the under ſide.

In the inferior grove, the corpus ſpongioſum urethræ lies, which goes down to the perinæum, and forms the bulb of the urethra; it terminates forward in a conſiderable expanſion, conſtituting what is cal-

led the glans penis, which is entirely a continuation of this ſpongy ſubſtance. The cells of the corpus ſpongioſum urethræ do not appear to be ſimilar to the cells in bone and other parts, but ſeem to be made up of plexuſes of veins.

The canal by which both the urine and ſeed is conveyed, is called the urethra; it runs through the corpus ſpongioſum from the bladder, and terminates at the extremity of the glans by a narrow oblong orifice. The cavity of this canal begins on the ſide of the bulb of the urethra, is about the ſize of a gooſe quill, and is larger when the penis is flacid and relaxed, than when it is erect; which accounts for the difficulty of making water when the penis is in an erect ſtate. Juſt within the glans the ſides of this canal are depreſſed; which depreſſion is called foſſa navicularis. The inſide of the urethra is lined with a fine delicate membrane of exquiſite ſenſibility, which is perforated by a great number of oblong holes called lacunæ. Theſe are the orifices of the excretories of ſeveral ſmall glands diſperſed thro' the ſubſtance of the urethra; they ſecrete a glairy fluid, which,

with

with a fluid that comes from the proſtate and Cowper's glands, ſerves to defend this inner membrane from the ſtimulus of the urine. Two of theſe lacunæ (which are deſcribed by Morgagni) are more conſiderable than the reſt, and are ſituated near the glans penis, the one under the frænum, and the other near the foſſa navicularis: there are other two near the bulb of the urethra, which are the openings of the excretory ducts from two glands called Cowper's glands: theſe glands are ſituated under the membranous part of the urethra within the bulb, one on each ſide. The before-mentioned membrane is continued over the glans.

The muſcles of the penis are the erectores, acceleratores, and tranſverſales. The erectores penis ariſe near to the tuberoſity of the iſchium, and run forwards and upwards, and terminate in the corpora cavernoſa. The acceleratores urinæ come down obliquely backwards from the crura penis on each ſide, and cover the bulb of the urethra, making, where they meet, a tendinous line along the middle of the bulb. The tranſverſales perinæi ariſe from the

inſide

inſide of the tuberoſity of the iſchium, and go down to the perinæum.

The perinæum is the ſpace between the under part of the penis and ſcrotum, and the anterior edge of the anus.

The principal arteries are called pudicæ, of which one is external, and the other internal. The external branches of the crural arteries, are diſtributed to the integuments of the penis; the internal pudicæ, which are branches of the iliac or hypogaſtric arteries, run through the center of each corpus cavernoſum. But the courſe of circulation is different here from moſt parts of the body, as the blood does not paſs from the extreme arteries *immediately* into continuous veins, but is poured out into an intermediate cellular texture, from which it is afterwards received by the extreme veins, and is returned by a large vein on the upper part of the penis, which runs in a kind of groove formed by the corpora cavernoſa, and is called vena magna, or vena ipſius penis.

On the outſide of each artery is a nerve diſtributing its branches to different parts.

There are a great many lymphatic veſſels running

running in all directions, which generally accompany the large blood veſſels. Their coats have arteries and veins for their nouriſhment, and are endowed with great ſenſibility, as appears from the painful ſwellings to which they are ſubject. They therefore have nerves, as well as arteries and veins.

The lymphatic veſſels have a great number of valves, and convey the lymph to the glands in the groin, where they enter on one ſide, and come out at the other, in their way to the thoracic duct.

The glands of the groin may be conſidered as appendages to theſe lymphatic veſſels; and being liable to be affected in a gonorrhœa, from the diſcharge being prematurely ſuppreſſed, or from improper treatment of this complaint, it ſeems neceſſary to take notice of their ſituation and ſtructure.

A lymphatic gland reſembles a kidney bean, though in different bodies, and in different parts of the ſame body, a great variety in their ſize and figure is obſerved. Each gland is a congeries of tubes, conſiſting of arteries, veins, lymphatic veſſels,

and

and nerves, connected by the cellular ſubſtance.

The lymphatic glands of the groin are ſix, ſeven, or eight in number: of theſe ſome lie in the very angle between the thigh and abdomen; and others lie a few inches down on the fore part of the thigh. It is into theſe UPPER glands ALONE, that the lymphatic veſſels of the genitals enter; ſo that the *venereal* bubo, which ariſes in conſequence of an abſorption of matter from theſe organs, is always ſeated in thoſe UPPER glands; and the lower glands are never affected, except by the regurgitation of the matter, which very ſeldom happens, or from their vicinity to the glands firſt diſeaſed.

As it is the *upper* glands that are affected by abſorption of matter from the genitals, ſo it is the *lower* which are commonly firſt affected by the acrid matter of an ulcer, diſeaſed joint, or carious bone, in the parts *below* thoſe glands: a circumſtance that may aſſiſt us in the diagnoſis of thoſe two kinds of buboes; remembering, that this rule *may* be liable to an exception from one of the lymphatic veſſels *paſſing* the

lower

lower glands, and only entering the upper. And ſometimes a lymphatic veſſel will paſs by *all* the glands without entering one of them, and continue on to the thoracic duct.

This obſervation may account for the venereal poiſon being *ſometimes* taken into the habit, *without occaſioning a bubo*, by inflaming a lymphatic gland in its paſſage.

The integuments of the penis are the ſame as in other parts of the body. It has cellular membrane, which is here very tough, ſo as to have been called by ſome a tendinous ſheath. Where the penis is connected to the fore part of the ſymphyſis of the pubis, the cellular membrane is particularly ſtrong, and has been called ligamentum ſuſpenſorium; but it is not properly a ligament, and ſeems to be only common membranous connection. Near the glans penis this membrane is *reticular, not cellular*.

The cuticle, ſkin and rete mucoſum are very thin on the penis, and have ſeldom if ever any fat under them, even in the fatteſt bodies. Theſe parts are ſupplied with many ſmall branches of nerves. The præ-

puce,

puce, which covers or incloſes the glans, is nothing more than a fold of ſkin, and the ſkin reflected over the glans makes its coat. Underneath it makes a tight band, called the frænum, which is fixed to the under ſide of the glans, and draws it down in erection. The frænum is ſometimes originally too tight; in that caſe, it may be divided by inciſion.

Near the baſis of the glans penis is a circular border, called corona glandis: round the baſis are a number of ſmall glands, which ſecrete a fluid or mucus, that is of a fiſhy ſmell when it has been retained for any time under the præpuce. There is a little hole on each ſide, that appears (by the help of a magnifier) to be the ſource of this fluid.

Here it may not be improper to recommend frequent waſhing and bathing of the parts, as this fluid, by being retained, becomes acrimonious, and a diſcharge like a clap enſues: and it is very probable, that many cutaneous diſeaſes originate from want of cleanlineſs, by which the pores of the ſkin are obſtructed.

The ſame kind of mucus is ſecreted from the

the glans clytoridis in women, as from the glans penis in men; and women are more frequently troubled with this complaint than men. It cauſes an itching all over the ſkin of thoſe parts, and moſtly proceeds from internal uncleanlineſs. The warm bath, or frequent waſhing the parts affected, generally relieves; if not, a proper uſe of the aqua ſaturnina camphorata will ſeldom fail to accompliſh that end.

SECTION III.

The gonorrhœa, ſpeaking in general, is a preternatural diſcharge from the urethra; and when it is *not* the effect of venereal poiſon, it is occaſioned either by ſharp juices in the conſtitution, or ſometimes it is quite local.

Some have thought that the diſcharge flowed from the lacunæ; others from the proſtate gland; and others from the veſiculæ ſeminales. It is evident, however, that the clap affects not only one, but every part of the urethra; that is, though at firſt it may affect only one particular part, it ſpreads from one to another, if not timely ſubdued, until it affects the whole canal.

It is obſerved, that the venereal poiſon affects only thoſe parts that are without a cuticle, or where it is very thin; which is the reaſon why we find the urethra ſo commonly affected, and not the ſkin of the penis: or if there is any crack in the cuticle, or little ſore about the penis, a chancre is the conſequence of the application of the venereal poiſon to that part, though there may be a diſcharge from the urethra notwithſtanding.

The morbific matter which produces the venereal diſeaſe, from its effects, appears to be of a ſpecific nature, and different from any other infectious matter with which we are acquainted.

The *ſpecific* nature of the venereal poiſon has been the ſubject of many fruitleſs enquiries, and is perhaps unknown. We are told by one * of the moſt eminent chymiſts perhaps in Europe, that it is too ſubtile for chymical analyſis, and therefore can only be diſcovered by its effects.

" It is obſerved, that its operation upon the human body differs according to the

* Dr. Saunders, Prof. Chym. and Phyſician to Guy's Hoſpital.

parts

parts which are primarily affected, the manner in which it has been communicated, and perhaps according to the degree of virulence in the original infection, as alſo the habit of body of the perſon who receives it. In ſome it unites more readily with the fluids, and produces its effects on the different ſecretions; in others, it attacks the more ſolid bones, and inſinuates itſelf into their very ſubſtance. In ſome it cauſes the moſt excruciating pains; in others, the moſt virulent and ſanious ulcers: in many it lies in the conſtitution dormant and inactive, ready to break out in various forms, and with much violence, from ſome occaſional cauſe."*

From the effects it produces in the conſtitution, it ſeems reaſonable to conclude, that it is of a peculiar *acrid* nature, and it probably becomes more or leſs acrimonious, according to the different temperament of the patient. The moſt virulent infection in ſome conſtitutions, produces a gentle diſeaſe, whilſt, in others, the ſlighteſt infection gives riſe to the moſt violent and obſtinate ſymptoms. As this difference

* Dr. Saunders.

may

may ariſe from the patient's blood being tainted with a ſcorbutic or ſcrophulous leaven, is it not reaſonable to ſuppoſe the different degrees of malignity in a great meaſure depends on the conſtitution of the party receiving the infection?

It has been a matter undetermined, in what manner the infection is communicated, when taken by coition: it ſeems moſt probable, that the venereal poiſon is imbibed by the lymphatic veſſels of the glans penis, whoſe orifices, in conſequence of a particular organization, are diſpoſed to abſorb the infected matter. The late ingenious Mr. Hewſon, in his experimental enquiries, obſerves, that thoſe parts of the ſkin which are intended to have more ſenſibility than the reſt, have thoſe proceſſes called villi moſt remarkable. This is evident from a minute injection, when we compare the lips, *glans penis*, and other parts; and whenever abſorption is performed, the blood veſſels become turgid, and the orifices of the villi ſtand rigidly open; ſo that thoſe parts being more liable to be infected than others, ſeems not ſo much to depend on the thinneſs of the cuticle,

as

as to their being more diſpoſed to abſorption, from having more of theſe proceſſes called villi. The great Boerhaave was of opinion, that the *time* of imbibing the infection, is when the penis begins to ſubſide from its turgid ſtate in the venereal paroxyſm.

The diſcharge which appears ſoon after taking the infection, is owing to the ſtimulus of the venereal poiſon, which, by irritating the orifices of the excretory ducts, cauſes a greater ſecretion of mucus from the ſubjacent glands. Thus it is obſerved, that when any ſharp acrid matter irritates the ſtomach and inteſtines, immediately the glands in thoſe parts emit a lubricating fluid to blunt the irritating ſpiculæ. It muſt therefore be conſidered *only* as an effuſion of lymph ſecreted from the different glands, which acquires a more viſcid conſiſtence, and becomes of a more acrid nature, from the inflammatory ſtate of the ſecretory and excretory veſſels, and appears *like* pus or matter.

The quantity of the diſcharge is different in different people, and in the ſame perſon at different times, owing to the different

ferent ſtate of the parts affected, as well as the degree of ſtimulus that is applied.

The variety in the colour of the diſcharge, ſeems alſo to depend on the different ſtate of the ſecretory and excretory veſſels, which appear to poſſeſs a power of changing the lymph from its natural ſtate, into a fluid like pus or matter; and therefore, according to the *kind* and *degree* of inflammation, the diſcharge may vary, as in weak relaxed habits, the fluid may be of a mild nature; ſo in inflammatory caſes, where the veſſels act ſtrongly, the diſcharge, in conſequence of that ſtrong action, may acquire a more ſanious appearance. It has been ſuppoſed by ſome, that this variety of colour is owing to the adventitious mixture of blood or pus, from the venereal virus corroding ſome capillary blood veſſel. But Mr. Percival Pott obſerves, that inflammation and irritation of the membranous linings of the urethra and vagina, will fully account for *all* the *appearances* in this diſeaſe, when there is neither ULCER, or ABSCESS.

The ſame eminent ſurgeon alſo obſerves,

" That

" That in caſe of ſtrictures in the male urethra, the diſcharge occaſioned by a bougie, *properly* and *judiciouſly* uſed, is a diſcoloured *mucus*, and not *matter*, though it is generally ſo called by Daran and others. It is from the diſcharge of this mucus, and the dilatation of the paſſage, that the relief is obtained, and *not* from any deſtruction or diviſion of the parts. The bougie which produces TRUE MATTER, does much more harm than good, and makes a ſore where there was none, and where there ought to be none.

The inflammation may be of two kinds, eryſipelatous, or phlegmonic; but we have reaſon to ſuppoſe, that it is generally the former, or that kind of eryſipelas diſtinguiſhed by the name of erythema, where the veſſels on the ſurface of the membrane in the urethra, communicating with the rete mucoſum, are affected. We are of this opinion, becauſe, though the inflammation may affect only one particular part, the morbid affection is quickly communicated to the whole extent of the urethra; and the eryſipelatous inflammation is often diſpoſed to ſpread from one place to another

ther on the ſame ſurface, and in ſo doing, to leave the place it had at firſt occupied.

That kind of ſenſation, which is felt as if the penis was compreſſed by the hand, ſeems to be owing to the lymphatic veſſels being inflamed, which are very ſuſceptible of pain in that ſtate, and are affected by the diſtenſion of the adjoining blood veſſels, and the cellular ſpongy parts of the penis.

The frequent erections during this complaint are generally involuntary and ſpaſmodic, and are effected by the venereal ſtimulus, as we obſerve a ſimilar effect is produced in people advanced in years, and alſo in young children, in a morning, from the ſtimulus of the urine. Ballonius has given a very uſeful hint from this phœnomenon, viz. "Let him who is not very potent in his generative faculties," ſays he, "perform copulation, after much titillation, with his *urine retained*, and having a great deſire to diſcharge it."

The chordee ariſing from venereal infection is of two kinds: the firſt, which is the moſt common, happens in conſequence of the veſſels of the cavernous body of the urethra being inflamed; ſo that the

penis

penis in erection is drawn down in a curve. The ſecond, is, when the penis ſeems to be tied round with a cord, which is owing to a lymphatic veſſel being inflamed, which runs in that direction.

In a *recent* gonorrhœa, the ſcalding or heat of urine is occaſioned by the internal membrane of the urethra being inflamed or excoriated, and the mucus, which is deſtined to lubricate and defend this membrane, from the ſaline particles of the urine, inſtead of being a mild emollient fluid, is vitiated and depraved, and becomes of a thin acrid nature. This lubricating fluid is ſometimes deficient alſo in quantity, from ſome of the larger canals being obliterated, in conſequence of inflammation, ſo that the tender membrane is left without its proper defence, and the urine, as it paſſes, irritates and cauſes pain.

This ſymptom may alſo ariſe without any venereal diſorder, and ſometimes happens from the great acrimony of the urine, owing to its being too long retained in the bladder, or not properly ſecreted, from a mal-conformation of the ureters and kidneys.

The late celebrated Baron Haller obſerves, that the genital organs are both *ſenſible* and *irritable*, and are endowed with an irritability, *peculiar* to themſelves. And that as irritability depends on the mucus, the different degrees of irritability are proportioned to the different conſiſtence of the mucus.

SECTION IV.

Symptoms of a recent *Venereal Infection.*

It is obvious to common ſenſe, that in order to perform an effectual cure in venereal complaints, it is neceſſary to know, whether the diſorder is local, and in a recent ſtate, or whether there is reaſon to apprehend that the infection is abſorbed, and the whole habit infected. We have too many inſtances, where the diſorder has been treated with medicines that have not an antivenereal quality, whereby an illuſory cure was obtained, and though the *ſymptoms* were ſuppreſſed, the *cauſe* was not eradicated, but reappeared upon exerciſe, freer living, or venereal embraces.

When

When a perſon has had connections with a woman, if he has received any venereal infection, a diſcharge from the penis is obſerved, which leaves a ſtain upon the linen, like a drop of milk; and if it is attentively examined, a ſmall ſpot of a yellow or green colour, and of a thicker conſiſtence, is perceived in the middle of it. It *commonly* makes its appearance in two, three or four days after the infection has been received, if the patient has taken any ſevere exerciſe, particularly on horſeback, or has been living intemperately. If he is of a healthy habit of body, and has lived temperately, it is frequently longer before any ſymptoms ariſe, to indicate that he has got the infection. Sometimes previous to any diſcharge, there is a kind of tickling ſenſation perceived on making water, in or near the teſticles, which is frequently attended with a heat or ſcalding, called ardor urinæ, eſpecially when the laſt drops of urine come away. At other times, before any diſcharge is perceived, the orifice of the urethra looks red and inflamed; and if the patient uſes much exerciſe, a ſoreneſs is felt on that part, by the

the rubbing of the ſhirt, ſhould the glans be uncovered.

When the above ſymptoms appear a few days after having connections with a woman, the perſon ought to apply for proper relief, as he may be well aſſured he is infected, particularly, if a ſcalding accompanies the diſcharge.

When the running comes on *a few hours* after a connection of this kind, with *no heat* or ſmarting on making water, and is a clear pellucid fluid, it is moſtly a gleet; but ſhould it be *diſcoloured*, and attended *with heat of urine*, it is moſt probably an old infection, that has been prematurely ſtopped.

Sometimes (though not often) in a *recent* infection, a diſcharge is perceived behind the glans or nut, and from the internal part of the præpuce or foreſkin, *without* any diſcharge from the urethra, this ſymptom is generally occaſioned by a former infection, except it is in conſequence of uncleanlineſs, and then it is *not* venereal. Theſe are the common ſymptoms of the mildeſt ſpecies of gonorrhœa, which by the uſe of proper remedies, may be

cured

cured in a few days—hence appears the advantage of applying early for relief.

When proper methods of treatment are not purſued, as the diſorder advances, the venereal virus acquires a greater degree of acrimony, the inflamation becomes more general, and frequently affects the parts near the neck of the bladder, a more copious diſcharge from the urethra enſues, which is of a thicker conſiſtence, and of a yellow, green, or bloody colour; often a throbbing and heat in the perinæum is perceived, with a frequent deſire to make water, and often a ſtrangury; the erections are more frequent and painful, and the penis is in a manner incurvated, or bent double, particularly when the patient is warm in bed. This pain, in erection, is called a chordee. When theſe laſt ſymptoms appear, it is preſumed that the ſeminal veſſels, proſtate gland, and the parts adjacent to the bladder, are affected, which require a more judicious treatment than is generally met with in this metropolis. Under theſe circumſtances, ſhould the diſcharge be ſuppreſſed, before the venereal poiſon is entirely ſubdued, a bubo, or ſwel-

led

led teſticle will moſt probably be the conſequence.

A bubo ſeldom appears *ſoon* after the infection is received, but in conſequence of neglect, miſmanagement in the treatment, or from ſome error committed by the patient himſelf. When this ſwelling in the groin happens in a *recent* gonorrhœa, a ſlight pain and ſtiffneſs is felt in the part, a day or two before the tumor or ſwelling is perceived; and in plethoric habits the gland is painful and the part looks inflamed. But, if it ariſes in conſequence of the maſs of fluids being infected, there is ſeldom any ſtiffneſs or pain perceived at firſt, nor any remarkable heat, tenſion, or pulſation, in the part affected, but the tumor has a ſoft œdematous feel, and there is no diſcolouration of the ſkin. Therefore, in a bubo which is owing to a recent infection, the venereal poiſon, which occaſions the tumor, is conveyed by the lymphatics of the penis to the inguinal glands, where moſt commonly it remains for ſome time, and it is attended with leſs danger to the conſtitution, than when it ariſes without any *manifeſt* cauſe, as it then proceeds from a venereal taint in the conſtitution.

It

It has been generally ſuppoſed, as the lymphatic veſſels of the penis paſs through the inguinal glands in their way to the thoracic duct, and as the venereal infection is carried into the habit by theſe veſſels, that previous to the venereal virus being taken into the general maſs of fluids and producing a pox, the lymphatic glands in the groin ſhould *always* be infected, and conſequently inflamed, and occaſion a bubo, putting the practitioner timely on his guard to purſue ſuch methods as may be moſt likely to prevent the habit from receiving any venereal taint. But ſince the lymphatic ſyſtem has been ſo minutely traced by diſſection, and accurately deſcribed by my late worthy friend Mr. Hewſon, we find that the lymphatic veſſels do not *always paſs through the glands*; it may therefore happen that the venereal poiſon may, upon being abſorbed, paſs into the circulating maſs of fluids, by one of the lateral branches, *without entering a lymphatic gland*, or inflaming it. That this is probable will evidently appear by examining the third plate in Mr. Hewſon's experimental enquiries, of the lymhpatic

ſyſtem,

ſyſtem, where the mercury (in making the preparation) appears to have paſſed from the groin, the whole length of the trunk of the body, without entering a lymphatic gland. From which fact may be underſtood how the venereal poiſon *ſometimes* enters the habit, and produces a pox, without occaſioning a bubo. Inſtances of which every careful obſerver muſt have remarked.

The variolous matter introduced by inoculation, although it *frequently* produces inflammation and ſwelling of the glands in the axilla, or arm pit, yet is not *always* attended with thoſe ſymptoms. Another reaſon why theſe poiſons do not *conſtantly* affect the lymphatic glands in their way into the body, may be the diminiſhed ſenſibility of theſe glands, in ſome particular caſes: whence the ſame poiſon which *at one time* would have produced the worſt effects, may at another paſs through theſe glands without inflaming them.

The lymphatic veſſels conveying the poiſon which inflames them, may be traced particularly when the infection is received by the hand, as ſometimes it happens,

pens in diſſecting dead bodies infected with the venereal diſeaſe, if there be any cut or crack in the cuticle. A ſmall red ſtreak may be obſerved, which is the inflamed lymphatic veſſel running along the fore arm, diſappearing at the bend of the joint, and appearing above paſſing into the axillary gland under the arm, where a bubo is formed.

Moſt elegant preparations of the lymphatic veſſels, made by Mr. Cruikſhanks, are ſhewn at Dr. Hunter's anatomical lectures.

Cancerous ulcers, commonly called chancres, may happen either with or without a diſcharge from the urethra; and though they are ſometimes merely local, in conſequence of the venereal poiſon having been depoſited on the glans, yet they are more frequently ſymptoms of a general taint.

When they appear ſoon after the infection is received, they are commonly near the orifice of the urethra, or on the glans, often affecting the frænum, and ſometimes underneath the præpuce. In this ſituation, they are attended with great pain and in-

flammation, and frequently occaſion a phymoſis.

But when they ariſe in conſequence of an infected habit, they are not ſo painful, and are generally accompanied with ſome other ſymptom of a confirmed pox, ſuch as ulcers in the throat, nocturnal pains, ſcurfy eruptions about the roots of the hair, and eruptions in other parts of the body, which commonly are ſufficient ſymptoms to diſtinguiſh them by. But by attending to the nature of the diſcharge, for a few days, the difference is obvious. In the latter caſe, it is more ſanious and acrid; ſo much ſo, that it deſtroys the part, and is not ſo eaſily checked by topical applications; whereas in chancres ariſing from *recent* infection, the diſcharge is not of ſo acrid a nature, though the pain and inflammation is greater.

The phymoſis is ſuch a conſtriction of the præpuce or foreſkin *over* the glans, as prevents it from being drawn backwards.

The paraphymoſis is ſuch a conſtriction *behind* the glans, as hinders it from being drawn *forwards*.

Theſe ſymptoms are not *always* the effect

ſect of a venereal cauſe, though, in general, they are occaſioned by chancres, or a defluxion excited by the acrimony of the venereal poiſon.

Therefore, when we find that local ſymptoms, ſuch as chancres, bubos, &c. though owing at firſt to recent infection, do not give way to the uſual treatment, or break out again, after having been apparently cured, without a freſh infection, we may with great probability conclude, that the venereal poiſon has gained admiſſion into the blood, and tainted the general maſs of fluids. But if, at the ſame time, we find ulcers in the throat, dry ſcabby eruptions on the ſkin, or appearing amongſt the hair, we may be aſſured, that it is a confirmed lues or pox. Other ſure ſigns are thoſe deep ſeated pains, which are felt chiefly in the night, on the ſhin bones, arms, head, and ſometimes on the ſhoulder blades; alſo thoſe hard indolent ſwellings, as nodes in the perioſteum, and exoſtoſis upon the bones, which, when they are painful, may be ſuppoſed to proceed from a venereal cauſe.

Theſe are the moſt *manifeſt* ſigns of a confirmed

confirmed lues; there are others, which are merely equivocal, and except they are attended with other ſymptoms, cannot be deemed *certain* ſigns of the venereal diſeaſe, ſuch as violent inflammations of the eyes, obſtinate headachs, wandering and obſtinate pains in different parts of the body; none of which can be known to be venereal, except they coincide with ſome or other of the more certain ſigns.

It ought therefore to be remembered, that a confirmed pox, however ſlight the ſymptoms may be, which give the firſt notice of it, is a very ſerious diſorder; ſince if it is improperly treated, or neglected in the beginning, it hardly ever fails, ſooner or later, to introduce a train of ſymptoms, which not only render the patient miſerable to himſelf, but, under ſome circumſtances, a nuiſance to ſociety.

SECTION V.

On the Cure of the RECENT GONORRHOEA.

From what has been ſaid concerning the *nature* and *effects* of a virulent gonorrhœa, it plainly appears to be the conſequence of a preternatural irritation in ſome one, and ſometimes in all the parts, which have been ſhewn to be the ſeat of the diſorder. Now ſince this irritation is undoubtedly produced by the ſtimulus of the venereal virus, the plain, and obvious indication of cure, muſt be, to remove the irritating cauſe; that is, to ſubdue and deſtroy the venereal poiſon, by ſuch methods as are moſt likely to anſwer this purpoſe.

To enumerate the ſeveral ancient authors who have wrtiten on this ſubject, would be an arduous and endleſs taſk; and to mention the ſeveral methods they propoſed for the cure of a *recent gonorrhœa*, would be productive of no uſeful purpoſe.

Let us then enquire into the general practice of authors of a more modern

date.

date. We are told in a late publication, that the generality of authors are agreed, that purging is the remedy for the gonorrhœa, as is ſalivation for a confirmed pox; and for the ſcalding in making water, (called ardor urinæ) that bleeding is the ſovereign remedy.

A moſt eminent ſurgeon * has made the following juſt obſervation, " That the *merely curing* diſeaſes, is not all that is required; that was done, ſooner or *later*, while ſurgery and anatomy were in their moſt imperfect ſtate, and while every branch of medicine laboured under many inconveniences, which are now happily removed; but the *different* methods, in which chirurgical diſorders are *treated*, or their cures attempted, will make ſo conſiderable a difference in the *confinement* and *ſufferings* of the patient, as to be very well worth attending to."

In plethoric habits, if the inflammation be *very great*, bleeding and gentle purgatives may *ſometimes* be neceſſary, as auxilliaries, we allow; but they become uſeful,

* Mr. Percival Pott.

more

more on account of the bad habit of body occaſioned, too frequently, by various kinds of exceſs, than from the nature of the diſeaſe itſelf. When the pain is become great, from whatever cauſe, there will be an extraordinary flow of blood and humours to the veſſels in the parts affected, which, by diſtending the canals, and cellular ſubſtance, will increaſe the inflammation: therefore, diminiſhing the quantity of circulating fluids, removes the plethora, or too great fulneſs of the veſſels, diminiſhes the tone of the moving fibres, and tends to prevent the occurrence of a topical determination of the blood, to the part affected: but where the conſtitution is debilitated, or ſcorbutic, or the patient advanced in years, theſe evacuations are not required: therefore, though bleeding and purgatives may *ſometimes* be neceſſary, they are undoubtedly often employed without the leaſt ſhadow of neceſſity. When the general habit is diſordered, it will often make a very material difference in the treatment of venereal complaints.

As to ſtrong draſtic purges daily repeated, though they have the ſanction of thoſe illuſtrious

illuſtrious names, Boerhaave and Sydenham, to recommend them; yet it is *now* well known, from the immoderate and unſeaſonable uſe of ſtrong purgatives, that they frequently act a contrary part, and, inſtead of *curing* the diſeaſe, aſſiſt it to overcome the conſtitution. For it is very obvious, from the degeneracy of the conſtitutional vigour of mankind, that the preſent race are leſs able than our anceſtors, to bear the repeated operations of bleeding and purging. And it will hardly be denied, that obſtinate gleets as frequently are the effects of ſtrong purges, as they are eaſily and certainly prevented, by the uſe of tonic medicines; ſuch as Peruvian bark, ſteel, &c. &c. where the venereal virus has been *previouſly* ſubdued.

Others have been equally unſucceſsful in their method of treating venereal caſes, from attempting to diſcover the *nature* of the morbid fluid. Aſtruc ſays, it is of an inflammatory, coagulating, fixed, and probably of an acid, or ſalſo-acid nature. Cockburne endeavours to prove an acid, by chymical experiments; others have declared

clared this poiſon to partake of a volatile alkali.

All this is ſyſtematical, and does very well to read, but if the phyſician, or ſurgeon, ſhould ſet about the cure of his patient, by ordering acids, or alkalies, or abſorbents, or ſuch things as he imagines will conquer the predominant ſpecies of acrimony, he will preſcribe to very little purpoſe.

We know that the venereal diſeaſe ariſes from ſome peculiar ſubtile matter, which we find, by *experience*, produces its particular ſymptoms; but the *quality* of this poiſon, we cannot poſſibly deſcribe, nor determine; therefore, let us be under no concern, whether we know, or do not know, what its particular *qualities* are, provided we can tell, when it is preſent, what things will correct or ſubdue it. Fortunately, experience has furniſhed us with medicines that ſcarcely ever fail, if applied in time, and prepared with care and attention.

Upon the whole, we apprehend, that the frequent ill ſucceſs, in curing the *recent* gonorrhœa, has been occaſioned by attending chiefly to the *general* inflammatory

ſtate of the ſyſtem, and neglecting the *local* or *venereal* inflammation, by which means the venereal poiſon is abſorbed into the habit, and the gonorrhœa often terminates in a confirmed lues; or from the notion, that the diſcharge proceeded from ulcers in the urethra, improper modes of cure have been adopted by different people, with a view of deterging, incarning, and cicatrizing theſe imaginary ulcerations of the parts.

We obſerve, in regard to the abſorption of acrid matter, that frequently it is not *immediately* abſorbed, but remains for ſome time in a wound, before it enters the vaſcular ſyſtem: which fact is evident on introducing the variolous matter by inoculation; alſo in the poiſonous bite of mad animals; which poiſons are obſerved to remain inactive, until a topical inflammation ariſes on the place of their inſertion. May we not therefore conclude, that it is more owing to the *inactivity* of the poiſon, than the efficacy of any medicine hitherto known, that ſo few perſons die from the effects of the bite of a mad animal; and it is too true, that the only

only method to be depended on, is to render the poiſon inactive, by *immediately* burning the part, or, what is certainly preferable, to extirpate the poiſon before abſorption has taken place.

Therefore, in a REGENT gonorrhœa, it cannot be too ſtrongly recommended, to deſtroy, or render inactive, the venereal virus, by ſuitable topical applications, as ſoon as poſſible; ſince it ſeems to be the moſt rational and efficacious method of preventing the future ill conſequences of ſuch an injury, and preſerving the conſtitution from the infection.

In a late publication on this ſubject, a gentleman* of eminence in the profeſſion, gives the following ſatisfactory reaſons, why the method of curing this diſorder by injection, has not been more univerſally practiſed.

Firſt, "The patient's fear of not obtaining a perfect cure without the purging method."

Secondly, "Becauſe many people uſed injections *improperly*, in caſes for which

* Dr. Leake.

they

they never were calculated; or directed ſuch as were *pernicious in quality*, to the great injury of the patient. But this was not at all the fault of the remedy, but of thoſe who wanted ſkill to apply it. Hence, by abuſe, injections were brought into diſcredit, which was no more than what had happened to the moſt valuable medicines ages ago. Has not the uſe of Peruvian bark, mercury, and opium, been decried, as deſtructive to the conſtitution; yet how much would the power of phyſic be weakened, were thoſe ſalutary medicines taken away?"

Dr. Duncan, in his obſervations on the operation and uſe of mercury in the venereal diſeaſe, obſerves, "That mercury, when properly adminiſtered, is a certain antidote to the venereal virus; and that in whatever way it be introduced into the ſyſtem, it muſt come in *contact* with the venereal poiſon in thoſe parts in which it is lodged, *previous* to its producing a cure." And therefore he concludes, that mercury cures the venereal diſeaſe, from its power, as an antidote, in conſequence of its being *topically applied to the venereal* matter.

He alſo obſerves, "That when the matter

ter ocaſioning the infection, is ſtill in a ſtate of topical application *only*, as happens in the caſe of a gonorrhœa, the introduction of mercury into the ſyſtem is *totally unneceſſary*; and a cure may be effected by other means, not only with greater eaſe and ſafety, but likewiſe with more expedition.

Dr. Saunders, in his ſupplement to Mr. Plenck's treatiſe on mercury, ſpeaking of the cure of the venereal gonorrhœa, ſays, "It muſt be allowed, that there are many local affections, independent of any diſeaſe in the habit, which can only be cured by *external applications* to the diſeaſed parts; and as the *neglect* of *topical applications* in ſuch caſes, has been productive of infinite miſchief, by conveying freſh infection into the conſtitution, an early and a judicious uſe of *external applications* to a part *recently* and *primarily* affected, while an attention is ſtill paid to the general habit, often leſſens the quantity of infection introduced." Beſides, that mercury *topically applied* ſubdues or renders inactive the venereal poiſon, appears clearly, not only in thoſe ulcers to which dreſſings can be applied, but

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in others more out of reach, where its application can only be temporary. The advantages obtained in ſome caſes, by applying mercury to venereal ulcers in the mouth and throat, whether in the form of vapour or gargle, ſufficiently ſhew the truth of this aſſertion; So that the cure produced by theſe methods, is unqueſtionably to be referred to an immediate action upon the part." Therefore, that injections may with propriety be uſed, none will deny, except ſuch as have wanted opportunities of obſerving their good effects; ſince repeated experience, which is the moſt certain teſt of propriety in medical practice, has clearly ſhewn, that when they are ſuited in *ſtrength* and *quality*, to the *nature* of the infection, the *time* of its duration, and the *tenderneſs of the part* to which they are applied, they afford the moſt rational means of curing a *freſh venereal contraction*.

Hinc medicamenta externa in hoc morbo primis profutura cencendum eſt, materiam morboſam efficacius corrigere et mutare valeant, quam remedia interna vulgo adhibita, quæ per longas vaſorum ambages, debilitata ad loca adfecta tandem feruntur.

MONRO *on the Lymphatics.*

Notwith-

Notwithſtanding what has been ſaid of the advantages obtained from *proper* injections, it is of the higheſt importance to *avoid*, or at leaſt uſe *with great caution*, thoſe of an aſtringent nature. I believe I am not ſingular in my opinion, when I aſſert, that more poxes are occaſioned by the improper and unſeaſonable uſe or abuſe of aſtringent injections and balſamic medicines, than from any other cauſe. And it ſeems moſt probable, that the frequent diſorders in the urethra are generally from an injudicious treatment, by aſtringent injections.

Dr. Storck, in his Annus Medicus, juſtly obſerves, in the venereal diſeaſe: "Eſſentiæ, tincturæ, et remedia *balſamica* "ac *adſtringentia* hic raro profuerunt. In- "jectiones adſtringentes, conſolidantes et "præſertim *ſaturninæ* ſumma cum Cau- "tela evitanda ſunt, hæ enim peſſima "ſymptomata producunt. Etenim teſticuli "inde ſæpius intument, fiunt ſchirroſi; "oriuntur bubones inguinales. Vidi a "gonorrhœa, hac ratione ſuppreſſa, exul- "ceratum eſſe umbilicum, et eandem ibi "prodiiſſe materiam, quæ antea per ure- "thram exſtillavit."

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The fatal conſequences that will inevitably enſue from the uſe of aſtringent injections before the venereal virus is entirely ſubdued, muſt be obvious. If at any time they *are* required, it is for a tedious gleet, occaſioned by neglect or improper treatment at the beginning of the diſorder, and even then, they ſhould be of the mildeſt kind: but by uſing injections on the firſt appearance of the diſcharge in a virulent gonorrhœa, which do not poſſeſs any antivenereal quality, an apparent cure is frequently only obtained; for though the running may diſappear, yet the cauſe is not entirely eradicated, and a reflux of the infected fluids into the blood is occaſioned.

Another objection has been made to the uſe of injections, that when the diſorder ſeems to be ſeated in ſome of the parts adjacent to the bladder, there appears no poſſibility of conveying the preparation to the parts affected. With the *common* ſyringe, indeed, it ſeldom can be thrown up high enough, to produce any ſalutary effect; but by uſing the hollow flexible bougie, with an elaſtic ſyringe, it may

may be done with the greateſt eaſe and ſafety.

Therefore if the mode of treatment, by injections, has not *always* been attended with good effects, our cenſure ought to fall, *not* on the method itſelf, but on the miſ-application of it, by injudicious people.

The cure of a *recent gonorrhœa*, or freſh contracted infection, is very eaſily accompliſhed in a few days, without bleeding or purging; and provided the patient is in good health, the uſe of medicines internally is not neceſſary.

But when the diſorder has been of a *longer continuance*, and the patient is of a bad habit of body, it will often make a material difference in the method of treatment, as well as in the time required to accompliſh a radical cure.

It is therefore always neceſſary to make proper enquiry, in regard to the time when the infection was taken, and alſo to be informed, of the *particular parts* which are affected, being convinced, that injections have frequently failed, for want of this previous knowledge. For ſo long as the diſorder affects *only* the penis, *proper* injec-

tions, *judiciouſly* applied, will always ſubdue the venereal poiſon, and produce a radical cure, *in leſs time, with equal certainty*, and *leſs trouble to the patient*, than it is poſſible to do by any other means, *without* them.

Therefore, when the diſeaſe is *recent*, and attended with no pain, or ſmarting, near the *root of the penis*, we may conclude the infection has not extended far, and has only excoriated the lacunæ near the glans; in this caſe, a *proper* injection with a common ſyringe will be ſufficient to effect a cure; but where there is great pain or throbbing in the perinæum, with conſiderable ſmarting after making water, near the bladder, and frequent calls to diſcharge the urine, we may ſuſpect the proſtate and Cowpers glands, and the parts adjacent to the bladder, are affected; therefore a radical cure cannot be expected by injecting with the *common* ſyringe, as it is out of the reach of preparations injected by them. Under theſe circumſtances, the introduction of mercury into the ſyſtem, either by inunction, or given internally, is generally proper, as the infection *may* have got into the habit, without affecting the inguinal glands.

glands. Should there be any conſiderable degree of defluxion, or ſhould the inflammation have affected the ſeminal veſſels, or proſtate gland, if it is not quickly removed, a tedious gleet frequently enſues from the eroſion or relaxation of the excretory ducts of theſe parts; in theſe caſes, ſhould any aſtringent injection be uſed, or the diſcharge be ſtopped by any other means, *before* the venereal virus is ſubdued, a bubo, ſwelled teſticle, or abſceſs in perinæo, generally are the conſequences, which frequently terminate in a pox; therefore, the ſooner the inflammation is removed from the parts affected, the leſs injury they are likely to ſuſtain, and there will be leſs danger of the venereal poiſon being carried into the general maſs of fluids.

As the ardor urinæ, or ſcalding in making water, is one of the moſt diſtreſſing ſymptoms in a *recent* gonorrhœa, and whilſt it is violent, from the tenderneſs of the parts affected, ſurgeons have been hitherto prevented from uſing mercury, by way of injection, as it has generally been ſuppoſed to encreaſe the inflammation; it is therefore obvious, that the immediate removal

removal of the heat of urine, muſt be attended with material benefit, in expediting the cure, as well as relieving the patient of his ſufferings, by permitting the liberal and *immediate* uſe of mercurial injections, without giving the leaſt pain.

To accompliſh this purpoſe, the *uſual method* of treatment, is to dilute with large quantities of ſmall liquors, wherein nitre has been diſſolved, or emollient drinks, ſuch as lintſeed tea, barley water, with gum arabic and ſuch like: at the ſame time ſoaking the parts in warm milk and water, throwing up emollient injections, with ſometimes an opiate joined to them; and where feveriſh ſymptoms accompany the heat of urine, to bleed plentifully, and give frequent purges.

It is well known to every patient who has had a *ſevere ſcalding*, that none of theſe methods will remove this ſymptom, until they have been purſued many days, nay, ſometimes weeks, and in ſome caſes, the ardor urinæ has continued during the whole time of cure. When the feveriſh ſymptoms are high, bleeding, with an antiphlogiſtic regimen, is certainly required; but

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it becomes neceſſary, more on account of the *general* inflammatory ſtate of the patient, than to remove this *particular local* affection.

As for nitre and diuretics in general, with *large quantities* of diluting liquors, they ſeldom are wanted in a *recent* complaint; as by cauſing ſo great a flow of urine, they ſerve to multiply the patient's ſufferings, without abating his pain.

As this ſymptom in a *recent* gonorrhœa, is merely a local complaint, topical applications to the affected parts, are found to be moſt effectual to remove it; but the inefficacy of any preparation hitherto in uſe, has induced moſt practitioners, as well as their patients, to wiſh for ſome medicine, or ſome method, which would anſwer this deſirable purpoſe, with greater certainty and expedition. The Author will therefore give ſome account of a preparation, he has uſed, and the methods he has purſued with uncommon ſucceſs, which has been found to remove *immediately* this troubleſome complaint, *without danger*, or *giving the leaſt pain to the patient*; and which when combined, or uſed along with a proper

mercurial

mercurial injection, effectually cures a RECENT gonorrhœa in a few days; as many gentlemen at this time in London have experienced.

I will not attempt to explain *how* it acts ſo immediately upon the parts affected, but ſhall give ſome caſes to elucidate its effects in the various ſymptoms of this diſorder. At the ſame time, the Author wiſhes to have it underſtood, that what he has to advance on the efficacy of the preparation, in IMMEDIATELY relieving the ardor urinæ, is meant in RECENT gonorrhœas, and not in old caſes.

A young man, twenty-two years of age, of a very delicate, though healthy habit of body, applied to me on the 17th of July 1777, for a *recent* clap, which was attended with great ſcalding on making water; the diſcharge was moderate. He began to uſe the preparation for the ardor urinæ, which *immediately* took away the heat of urine, and by injecting it night and morning, combined with a mild ſolution of mercury, he was perfectly cured, in ten days, without the uſe of any other medicine whatever, and continued perfectly well for ten months, when he contracted another

another gonorrhœa, and was cured by the ſame method of treatment.

It may not be improper to obſerve, that in every ſtage of this diſorder, keeping the parts affected clean, by waſhing with milk and water of a *moderate* degree of heat, is very conducive to a ſpeedy cure, as well as comfortable to the patient. Where a *coſtive habit* indicated the uſe of laxatives, I have always found the gentleſt, the moſt efficacious: ſuch as two drams of cathartic ſalt in an infuſion of ſena, or, what I have found preferable, in water impregnated with fixed air, and occaſionally repeated.

In December 1777, a lady ſeven months gone with child, came to aſk my advice for a diſagreeable ſmarting, with difficulty in making water, attended with a diſcharge from the uret hra. As her huſband had been my patient ſome months before, I concluded it was venereal, without mentioning my ſuſpicions to her. The vagina and veſtibulum uteri were free from inflammation, but the orifice of the urethra looked red, and internally was ſo ſuſceptible of pain, as not to permit the introduction of the ſmalleſt bougie. By the daily uſe of water

water impregnated with fixed air, to each pint of which was added half a dram of the native foſſile alkali, (nitrum vel natron antiquorum) the inflammation was abated, ſo as to ſuffer the uſe of mercurial injections *per urethram*, which took away her complaints in a few days, and they have not returned.

As we very frequently have patients, who have a virulent gonorrhœa that is *not* recent, it would be imprudent to truſt to injections *alone*; and when attended with other ſymptoms of venereal infection, as chancres, bubo, &c. it then becomes neceſſary, at leaſt prudent, to introduce a proper quantity of mercury into the ſyſtem; but as it would be abſurd to ſuppoſe, there can be one *invariable* method of uſing this powerful corrector of the venereal poiſon, it is neceſſary, that ſuch meaſures ſhould be purſued, as are beſt ſuited to the ſtrength, age, ſex and conſtitution of the patient, as well as to the ſtate of the ſymptoms.

In a virulent gonorrhœa of long ſtanding, *unattended* with any other local ſymptom of venereal infection. I have found mercury given internally, anſwer every

every purpoſe I could wiſh; but where a virulent diſcharge, is accompanied with a bubo, or ſwelled teſticle from a venereal cauſe, greater benefit may be obtained from applying it externally in the form of unction, with proper mercurial injections.

In *ſtrong plethoric* habits, where mercury is deſigned to enter the circulating ſyſtem; previous to its uſe *in any form*, taking away a proper quantity of blood, is not only neceſſary, but will generally be found to make its operation *more ſafe* and effectual, and admit of this valuable ſpecific being uſed with greater freedom; and where a coſtive habit prevails, or laxatives are required on any other account, two or three ſpoonfuls of the following mixture, given occaſionally at bed time, I have found anſwer better than any other medicine,

℞. ol. ricini ʒiſs
Vitell. ovi parum,
Probe contritis in mortario, adde ſenſim
Aq. menth. ſimp.
— Cinnam. ſimp. an. ʒii
Syrup. roſar. ſolutiv. ʒſs. miſ.

Where oily mixtures are diſagreeable, the cathartic ſalt or ſoluble tartar in an infuſion of ſena may be given. But laxative medicines are very ſeldom required, where mercury is uſed internally, except the ſalivary glands ſhould be much affected, which may generally be prevented by proper care.

In weak relaxed conſtitutions, where the fluids are in a more diſſolved ſtate, all evacuations previous to the uſe of mercury are not only unneceſſary, but improper; in theſe caſes, I have found it generally requiſite to give the bark, and water impregnated with fixed air for common drink.

In whatever form mercury is uſed to ſubdue the venereal diſeaſe, whether taken inwardly, or externally applied, it muſt paſs either through the lacteal, or the abſorbent veſſels on the ſurface of the body, before it can be received into the blood; and though we find many preparations of this ſpecific, may, under proper management, be ſucceſsfully employed in the cure of this diſeaſe, yet as ſome are better addapted to the various ſymptoms that occur,

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than others, it is therefore of great importance to attend to the ſeparate *effects* and *operations* of particular preparations, in order to anſwer the different intentions of cure.

Among the various preparations of mercury, I have found none ſo ſafe or effectual in the cure of the venereal diſeaſe, as a ſolution of mercury, I have made, in which the crude quickſilver is ſuſpended. Though it has proved ſingularly beneficial in the cure of this diſorder, under its various forms and appearances, when exhibited internally, as well as when uſed by injection, yet I do not ſuppoſe or expect it infallible, and that in all patients, it will produce ſalutary effects, and never fruſtrate the hopes of the preſcriber. Experience and obſervation has convinced me to the contrary; but evident proofs of its ſuperior efficacy, in *ſafely* and *radically* ſubduing this diſeaſe, have induced me to prefer it, in moſt caſes, to any other preparation. Its ſuperior efficacy, may probably be owing to the perfect ſolution of the quickſilver, and the prodigious ſmallneſs of its mercurial parts, and in conſequence

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to its ſubtilty, whereby it penetrates the moſt minute veſſels of the body, and diffuſes itſelf through the whole ſyſtem, circulating readily with the fluids. It may be given with the greateſt ſafety in the moſt tender habits, ſo that thoſe of delicate conſtitutions, need not be afraid of a ſalivation, or the pernicious effects ſo often produced by other preparations of mercury.

In very obſtinate caſes, when the venereal poiſon has been long in the habit, it has proved moſt efficacious, and has ſucceeded in the cure, after large quantities of mercury had been introduced into the ſyſtem by inunction, without any material benefit; particularly where the venereal diſeaſe is attended with cutaneous eruptions, commonly called ſcorbutic, but which ought *carefully* to be diſtinguiſhed from *real ſcorbutic* blotches.

March 18th 1777, E. G. about forty years of age, was recommended to my care, by a gentleman in town, for a painful inflammatory ſwelling, which reached from her knee to her ancle, with two deep ſanious ulcers near the calf of her leg; on the other leg, there

was

was a node on the ſhin bone, and a large ſwelling under the ham, with ſcabby eruptions on the head, among the roots of the hair; her pains were ſo great ſhe could get little or no reſt, had a continual headach, and ſickneſs at her ſtomach. She had been ill two years, during which time, ſhe was ſalivated in St. George's hoſpital, and afterwards, in the Weſtminſter Infirmary. The preparation for the ardor urinæ was applied to the ulcers in her legs, which relieved her of the violent pain, and by taking a diet drink with the ſolution of mercury, ſhe got well in ſix weeks, and remains well at this time.

I ſhall add an inſtance of the different effects of this medicine and mercurial unctions, after the latter had been uſed without any benefit, in an obſtinate venereal caſe.

Auguſt 24th, 1778, I was deſired to viſit a gentlewoman in Weſtminſter, near forty years of age, who had been ill five or ſix years of a venereal complaint, and was much emaciated; ſhe had various ulcers on her forehead, lower jaw and ſhoulder, with a rigidity of her elbow, which was ſwelled and very painful, and her ham was

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ſo contracted, that ſhe could not walk acroſs the room, without ſome aſſiſtance. She had alſo a violent cough, attended with a ſhortneſs of breath.

Auguſt the 26th ſhe begun the uſe of a diet drink, with the mercurial ſolution, and had proper medicines ordered for her cough, and aſthmatic complaints: ſhe applied the ſteam or vapour of a mixture of vinegar and honey to her elbow, and flexor tendons of the leg, with an embrocation prepared with the yolk of a raw egg, beat up with two ounces of water, which ſhe uſed twice a day.

The ulcers diſcharged a fœtid acrid matter, to which was applied, the mercurial ſolution diluted with water impregnated with fixed air.

September 5th, ſhe walked near half a mile to my houſe, and was better in every reſpect. The ſame method of treatment was continued until the 29th, when ſhe left off taking any medicines, the ulcers were completely healed, only the ſkin in the forehead remained a little tender; her ham and elbow perfectly recovered their flexibility, and, except her aſthmatic complaints, ſhe was perfectly well.

Several

Several ſurgeons who happened to be with me, ſaw theſe two Patients, when they came to be dreſſed; and though both of them were unable to walk without ſupport for upwards of twelve months, they now can walk perfectly well. The neighbours, as alſo the patients, will certify theſe caſes to any perſon who may wiſh to be further informed.

Previous to my attending the above patient, ſhe had rubbed in large quantities of mercurial ointment at different times, and had alſo applied it to the ulcers, as I found on the dreſſings, when I firſt viſited her.

I could give ſeveral caſes to ſhew the efficacy of this preparation, where it was adminiſtered by other gentlemen of the profeſſion, but at preſent, it is unneceſſary, as the above ſufficiently prove its ſalutary effects, in ſubduing ſome of the moſt inveterate ſymptoms of the venereal diſeaſe; and as it acts in the moſt gentle manner, it may be ſafely given, without occaſioning the leaſt inconvenience, to the moſt delicate patients, or requiring any alteration from the uſual way of living, ſo as to give any one the leaſt

ſuſpicion

ſuſpicion of the nature of their complaint. It is therefore preſumed, that on further trials, it will be found one of the moſt ſafe and efficacious mercurial preparations, hitherto diſcovered, and from its active and penetrating properties, equally applicable to eradicate this pernicious poiſon, either uſed by injection for a gonorrhœa, or when given internally, where the infection has got admittance into the general maſs of fluids, and the whole habit is affected.

But the nature of this mineral is ſuch, that the greateſt care and circumſpection is required, in whatever form it is uſed, particularly when adminiſtered to perſons of weak lungs, or of a ſcorbutic habit of body, for ſhould it be too liberally uſed, or too ſuddenly thrown into the habit, diſagreeable conſequences will often enſue, as it is well known, that the moſt powerful remedies produce the moſt fatal effects, *when uſed improperly*: and though it is a melancholy truth, yet it is too often experienced, that the patient ſuffers more from its imprudent uſe, than from the violence of the diſeaſe it was deſigned to remove. Therefore, as every powerful remedy is by the abuſe of it, con-

vertible

vertible into the moſt powerful poiſon, it is not in the leaſt ſurpriſing, that ſo many perſons of tender and delicate conſtitutions, ſuffer from the uſual mode of treating this diſeaſe, when it is conſidered, that one *general* plan is indiſcriminately, or at leaſt with very little variation, purſued, in the treatment of people of all ages and conſtitutions. The moſt common, as well as the moſt fatal of theſe pernicious effects, are an affection of the lungs or conſumption, and violent headachs. But ſuch *muſt* be the fatal conſequences, attending the practice, whenever the *diſeaſe* is preſcribed to, and not the patient.

In June 1777, a young gentleman having got a ſlight venereal infection in the country, put himſelf under the care of an apothecary who had purſued this *general* plan of treatment, and gave him mercurial medicines at night, and a purge next morning, *conſtantly* for five weeks. Finding himſelf no better, but much reduced in his ſtrength, he came to town for farther advice.

In July, when he applied to me, he had a great diſcharge from the urethra, which

did not ſhew much ſigns of venereal infection, except the being accompanied with a little heat of urine, for which he uſed proper injections.

His general health ſeemed to claim the greateſt attention; he had a continual fever attended with a ſhort dry cough, which generally increaſed after eating, with a fluſhing in his cheeks. The reſt of his face was thin, and of a dirty ſallow hue, with his eyes ſunk in their ſockets; his pulſe was quick, particularly in the evenings, when it was alſo hard; he had a conſtant thirſt; he frequently complained of a particular kind of heat and dryneſs in the palms of his hands and ſoles of his feet; he ſlept badly, and towards morning a cold clammy ſweat broke out. In the day time he had frequent ſhiverings, *ſometimes* ſucceeded by a hot fit, with other hectic ſymptoms, which ſeldom terminated in a ſweat. This appeared to me, to be truly an incipient phthiſis mercurialis, or *mercurial* conſumption, ~~in~~ produced by improper treatment of his venereal complaint. As the diſeaſe was not far advanced, his appetite and digeſtion were pretty good,

and

and ſince he had left off taking mercurial medicines, a diarrhœa, which had been perpetual, was much abated, I hoped from a well regulated diet and temperance, to afford him more relief than I expected from medicines.

His diet was directed to be chiefly milk and ſtrawberries, and ſuch ripe fruits as were then in ſeaſon, abſtaining *entirely* from animal food, wine and malt liquors. Morning and evening he drank water impregnated with fixed air, to which, one third part of milk, warm from the cow, was added. To abate the heat and thirſt, which in the beginning were great, he took three times a day a ſcruple of purified nitre in a cup of coltsfoot-tea or barley-water ſweetened with honey; in leſs than a fortnight his night ſweats left him, his cough became trifling, and his pulſe much ſlower and fuller, and not the leaſt appearance of any venereal infection. Finding himſelf ſo much better, he inadvertently ſtayed out late one evening, and next day his cough returned with a pain in his ſide, for which a moderate quantity of blood was taken from his arm. He *now* perſevered ſteadily in the uſe of

milk

milk and ſtrawberries, with other ripe fruits, as his ſole diet; uſing for drink water impregnated with fixed air, to which was added the foſſile alkali, in the proportion of a dram and a half to two quarts of the water. By continuing this regimen and diet for near ſix weeks, he recovered his health and colour, ſo as to be able to go into the country, where he took conſtant exerciſe on horſeback; and when I ſaw him about five months ago, he had no returns of his complaint, and was in perfect health.

As the uſe of the ſolution of mercury, has hitherto been confined to my own patients, and exhibited only by thoſe gentlemen of the profeſſion, to whom I had given it to aſcertain its effects by tryal, I ſhall beg leave to offer ſome obſervations on thoſe preparations of mercury in general uſe.

In obſtinate venereal caſes, where a large quantity of mercury is neceſſary to be introduced into the habit, the practice by unction has been conſidered, as the moſt uſeful and efficacious method of cure. Many advantages may be derived from its uſe in this form, if properly managed; particularly

ticularly by this mode of uſing it, we avoid the diſagreeable effects ſo frequently produced by its internal uſe, on the ſtomach and inteſtines.

The only inconvenience which I have obſerved from the uſe of the mercurial ointments, (as uſually prepared) ariſes from the acrid nature of the ſubſtances with which the mercury is triturated. Every perſon I preſume, who has been much converſant in venereal practice, muſt have remarked the diſagreeable conſequences which are frequently occaſioned by the turpentine, with which the mercury is divided; from its acrid and irritating nature, it generally produces an eryſipilatous inflammation, appearing in little angry puſtles, on thoſe parts where the ointment is applied; beſides, from the viſcid and clammy nature of the turpentine and balſam of ſulphur, they ſeem ill adapted to penetrate the pores of the ſkin, and to be taken up by the abſorbent veſſels.

The mucilage of gum arabic ſeems alſo improper for dividing the mercurial globules, when intended for *external* uſe.

Sometimes it is prepared with lard alone, which certainly is a more eligible method,

but

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but from the great difficulty in perfectly extinguiſhing the mercury, it is liable to great uncertainty in its effects, as its activity will depend on the degree of triture employed in preparing it.

To obviate theſe objections to the unguent. cærul. fort. (as it is uſually made) I take the liberty to recommend a method of preparing it, which I have found from experience, to be *mild*, *penetrating*, and *efficacious*; and as the ſubſtance employed in the place of the turpentine, divides the mercury with very little trouble, and in much leſs time, I hope the following form will merit the attention of thoſe gentlemen, who may have occaſion to uſe this valuable, though untractable mineral, by way of inunction.

℞. Hydrargyri ʒi
Axung. porcin. ʒvi
Adipis anſeris purificat ʒii
Adeps cum hydrargyro intimè teratur,
Dein adde axung. porcin. et bene miſceantur.

Where

Where mercury is to be exhibited internally, I have found no preparation more efficacious, than the precipitate of calomel, as directed by Dr. Saunders. But as it is with ſome difficulty ſuſpended in a fluid, it may in moſt caſes anſwer better if given in a pill.

As I have always remarked, that the venereal diſorder is cured with the greateſt certainty, and in the leaſt time, where the mercury occaſions no apparent increaſe of evacuation by the inteſtinal tube, and where a gentle moiſture on the ſkin is produced, I have generally given this preparation with the pill è ſtyrace and camphor. But in ſome conſtitutions, mercurials, how much ſoever the complaints may ſeem to demand them, are found to produce very diſagreeable effects when internally exhibited; theſe circumſtances, which cannot always be foreſeen, ought carefully to be attended to, for in ſuch caſes, if we obſtinately perſiſt in their internal uſe; we ſhall be ſo far from relieving the patient, that we ſhall not only render the diſeaſe worſe, but materially injure the conſtitution.

Where mercury occaſions unuſual ſpaſmodic affections in the ſtomach and inteſtines, and its internal uſe is deemed neceſſary, if it be combined with opium and ipecacuanha, theſe diſagreeable conſequences will be prevented, without diminiſhing its efficacy.

In ſcrophulous, as well as ſcorbutic habits, the general health of the patient muſt be particularly attended to. As the former diſeaſe, *perhaps*, originates more from a faulty abſorption, than from any conſtitutional or hereditary taint in the blood, as is generally ſuppoſed, we muſt not therefore think to rectify this remote cauſe (which may in ſome caſes be attributed to a malconformation of the ſolids) by purging and evacuating theſe imaginary groſs humours, by which treatment we weaken the patient, who is already in too relaxed a ſtate; but endeavour to aſſiſt nature, in enabling her to perform the due ſecretions, by ſtrengthening the general habit, with tonic medicines, good air, and moderate exerciſe, at the ſame time that we deſtroy or render inactive the venereal poiſon, by mild mercurial preparations.

There-

Therefore, where ſcrophulous complaints are known, from glandular ſwellings in the neck or other parts, mercury ſhould be uſed with the greateſt circumſpection, as by its imprudent exhibition, we ſhould not only be diſappointed in curing the venereal complaint, but be liable to render the original diſeaſe more certainly deſtructive.

When the glands are painful and inflamed, no preparation of mercury ſhould on any account be uſed, but what is very mild; at the ſame time the ſwellings ſhould be carefully defended from the cold air; the bowels ſhould be render'd laxative, and the pores kept open by mild, diluting nitrous drinks.

In habits, tainted with a *real ſcorbutic* leaven, as where the gums are putrid, with blue or black ſpots, and eruptions on the body, which generally firſt appear on the outſide of the arms, from the wriſt to the ſhoulders, or ſometimes on the legs and thighs, mercury ſhould be cautiouſly adminiſtered, as it is obſerved, that a very ſmall quantity will induce a dangerous ſalivation in ſcorbutic patients, and is often followed by a diarrhœa or dyſentery,

which being ſtopped, the ſalivation returns. May not this, in ſome degree, be attributed to the bibulous diſpoſition of the lacteals and lymphatic veſſels, and perhaps from ſome peculiarity in the texture of the glands?

In theſe caſes, where a true ſcorbutic diatheſis exiſts, *previous* to a mercurial courſe, vegetable acids, with proper regimen, and keeping up the ſecretion by the ſkin and urinary paſſage, will generally be requiſite. Therefore the liberal and conſtant uſe of oranges, lemons, and other fruits, with whey made by aceſcent juices or crem. of tartar, and a vegetable diet, muſt be rigidly adhered to, if we expect to derive any benefit from mercury, in the cure of venereal complaints, complicated with the ſcurvy. Where I found ſuch manifeſt ſigns of a putrid habit, joined with a venereal complaint, after a proper vegetable diet had been purſued, I had the moſt convincing proofs of the ſuperior efficacy of the mercurial ſolution, particularly when given with a decoction or infuſion of the peruvian bark, which I thought, in theſe caſes, improved its ſalutary effects, by being

power-

powerfully antiſeptic, and prevent[ed] that putrid diſpoſition which mercury generally occaſions.

It may not be unneceſſary to obſerve, that the morbid matter or fault in the blood which produces the *true* ſcurvy, is different from that kind of humour, which is commonly, though improperly, called ſcorbutic; and which, when thrown out on the ſkin, appears in the form of tetters and ſcurfy eruptions.

Although the true ſcurvy is moſt frequently obſerved to attack thoſe who have been long at ſea, and ſoldiers encamped in low marſhy places, yet there are few conſtitutions in England, entirely free from ſome degree of ſcorbutic taint, as appears from their ſpongy gums and other complaints; I ſhall therefore beg leave to relate a method of treatment, which by varying as ſymptoms may require, I have found very ſucceſsful in a great number of patients, afflicted with this native endemial diſorder, together with a venereal complaint.

In July 1777, J. C. applied to me for a venereal diſorder, which he had contracted

tracted about ſeven weeks before; he never had any diſcharge from the urethra, nor heat of urine, or any other ſymptom, to induce him to imagine he had got the infection, until about a week before he applied to me, when he felt a ſoreneſs, at the end of the penis, where there was a little ulcer, with a ſwelling in the groin.

On examination, I found the inguinal gland ſwelled, and a chancre at the ſuperior part of the orifice of the urethra, with the glans in that part very hard.

He was a ſtout young man, but had that paſty complexion which denotes the general health to be affected. Perceiving his breath very offenſive, I ſuſpected he had been taking mercury, which he denied. On looking into his mouth, I obſerved his gums ſpongy, of a dark livid colour, and bleeding on the ſlighteſt touch. His arms were covered with ſmall purple ſpots, like flea bites, which he ſaid itched much in cold weather; his hams, wriſts, and the ſpaces betwixt his fingers, were quite clean and no ways affected. He had a pain acroſs his breaſt,

was

was often out of breath when he walked faſt, and had pains in his legs and thighs, with great laſſitude; he was alſo very low and dejected.

As he had caught a violent cold, attended with acute pain in his breaſt, and a cough, I took away a few ounces of blood, which was in a very diſſolved ſtate, and the ſerum like thick whey, which afforded him no relief.

As no doubt remained of a ſcorbutic taint, added to his venereal diſorder, he was ordered a vegetable diet; to abſtain from all animal food, and ſpirituous liquors, and to take milk for his principal ſupport; to drink whey made with the juices of ſorrel and Seville oranges, and when coſtive, to add from ℈ii to ʒi of ſal. polycreſt, to each pint of whey. This addition was ſeldom required, as his body was kept ſufficiently lax, by the whey and vegetable diet; and at the ſame time, a gentle perſpiration was kept up, by a little wine added to the whey at bed time, and a flannel waiſtcoat wore next his ſkin.

He waſhed his mouth frequently with an aſtringent and antiſeptic gargle, which took

off

off the ſoreneſs, and reſtored the gums to a ſound ſtate in a few days. By uſing a proper injection, a diſcharge from the urethra came on, which continued about a week.

This antiſcorbutic plan being regularly perſevered in for a fortnight, and proper applications uſed to the chancre, it healed, the glans became ſoft, and the bubo remained about the ſame ſize, as when he began. He was got much better as to his general health, and the itching on his arms was gone.

He then entered on a courſe of diet drink with the ſolution of mercury, to every quart of which, was added eight ounces of a ſtrong decoction of Peruvian bark, ſtill continuing his former regimen; by which means the bubo was diſperſed, and he got well in leſs than three weeks, and remains free at this time of his ſcorbutic, as well as his venereal complaints.

Another patient, whoſe ſcorbutic ſymptoms were nearly ſimilar to the above, but whoſe venereal complaints were of a much longer ſtanding, attended with a great diſcharge, was cured by following the ſame anti-

antiſcorbutic method of treatment, with proper mercurial injections, and the uſe of the following pills, prepared by rubbing the precipitate of calomel in diſtilled vinegar till perfectly united, to which was added manna, and the whole rubbed on a marble ſlab, and paſſed through a ſieve to ſeparate the impurities of the manna; to each ounce of the above maſs, was added.

Ext. cort. peruv. moll
pulv. myrrhæ, $\overline{an}$ ʒii

It was then formed into pills of a moderate ſize, to be given as the ſymptoms of the diſeaſe, and conſtitution of the patient required.

SECTION VI.

Of the Hernia humoralis and ſwelled Teſticle.

A ſwelling or enlargement of the teſticles, may ariſe from various cauſes. When it is occaſioned by a venereal infection, or takes place in conſequence of a critical termination of ſome diſeaſe in the habit, it is called hernia humoralis

When this diſeaſe happens in a virulent gonorrhœa, it is an inflammatory defluxion produced by a preternatural irritation on the

the mucous membrance of the urethra, in thoſe parts adjacent to the bladder, where the veſiculæ ſeminales terminate.

This ſpecies of ſwelling is particularly painful, owing to the great ſenſibility of the part chiefly affected, viz. the tunica albuginea; from the firm compact texture of this membrane, and its cloſe adheſion to the body of the teſticle, it is with great difficulty diſtended, which occaſions intolerable pain.

Sometimes, the ſwelling ariſes from a latent venereal taint in the habit, independent of a gonorrhœa, or any diſeaſe in the urethra; in this caſe, the diſtenſion is more gradual, conſequently not ſo painful, and the tumour feels hard and indolent.

It may alſo happen, either from the uſe of bougies, improperly uſed, or from the eſcharotic ingredients, with which they are made, irritating the parts near the neck of the bladder.

Sometimes it is occaſioned by ſtrong draſtic purges; alſo from cold, the effects of hard drinking or violent exerciſe; but moſt frequently it happens by the improper treatment of a gonorrhœa.

It

It is alſo liable to ſwell from external injuries, as a blow or bruiſe, and other cauſes, where there is no venereal infection; but all theſe, may eaſily be diſtinguiſhed by a careful examination.

The different occaſional cauſes muſt determine, what method of treatment is proper to purſue.

When it proceeds from the effects of a virulent gonorrhœa, the antiphlogiſtic method is generally neceſſary; if it originates from an old latent venereal taint, evacuations, &c. only become neceſſary, as particular ſymptoms may indicate.

When it ariſes from an inflammatory defluxion, it is immediately neceſſary to ſuſpend the ſcrotum in a proper ſuſpenſory truſs, and where no particular ſymptoms forbid it, to take away as much blood, *at firſt*, as the patient can conveniently bear; which often renders a repetition unneceſſary. To empty the inteſtinal tube, by emollient laxative glyſters, and foment the groin and ſcrotum with a warm anodyne fotus, covering the whole with a large poultice. If the pain ſtill continues violent,

an anodyne glyſter will generally afford relief

After ſufficient evacuations, I have found no method, which affords ſuch ſpeedy and permanent relief, as giving antimonials joined with opiates, ſo as to promote a plentiful perſpiration, which ſhould be kept up at leaſt twenty four hours, by drinking plentifully of warm diluting liquors; if the perſpiration is likely to flag, the ſaline draughts may occaſionally be given.

A young gentleman, from the country, of a ſtrong athletic make and good conſtitution, applied to me in May 1776, for a ſwelling in his left teſticle, with an acute pain darting down from his groin. He told me he had contracted a gonorrhœa about three months before, attended with a copious diſcharge, which had been ſtopped by injections of aq. ſaturnina, and ſome few doſes of calomel had been given; after that time, he perceived no ſymptoms of venereal infection, until his teſticle ſwelled, which was now ſo painful, as to admit of a very ſlight examination. However, as no external injury had

had befallen the part, nor any febrile diſorder preceded the complaint, I had no doubt of its being venereal; particularly, from the method of treatment that had been purſued, in the preceding gonorrhœa.

I took away twenty ounces of blood, and applied a ſuſpenſory truſs; as he came to reſide at my houſe during the cure, he lay down upon the bed for about an hour, when a violent ſickneſs and vomiting came on, which was encouraged by drinking warm chamomile tea. The ſwelling of the teſticle increaſed, the pain became more ſevere, and extended up to the groin. An emollient laxative glyſter was adminiſtered, which was repeated in an hour, and as it had no effect, after waiting ſome time, a few grains of calomel were given, with a draught prepared with caſtor oil, which produced the deſired effect. The ſcrotum and groin were fomented with an anodyne decoction, and the whole covered with a large poultice of lintſeed meal. Though he had found relief from the looſe ſtools, yet he continued reſtleſs in bed the whole evening, and the pain became as ſevere as before. An emulſion with caſtor oil, was

given

given by ſpoonfuls, every half-hour, to which was added, five drops of tinct. thebaica. About twelve at night, his attendant came to acquaint me, he was very reſtleſs, and deſired to get up. I found him very hot, and at times delirious, with ſubſultus tendinum. An anodyne glyſter was adminiſtered, his legs were put into warm water, and the following emulſion was ordered.

℞. Julep e camphor. uncias ſex,
Aq. cinnamon. ſimp. uncias duas,
Syr. e meconio drachmas tres.
Cujus ſumat cochl. duo ſubinde in languoribus.

He ſeemed more compoſed, and one of the following pills was given.

℞. Tart. emet. grana quatuor,
Extract. thebaic. grana tres. m.
Pro pilul. duabus.

He was ordered to drink plentifully of the following mixture.

℞.

℞. Aq. hordeat. libras ſex,
Mel. uncias quatuor,
Aceti vinos. uncias tres,
Nitri drachmas duas m.

He fell aſleep in about half an hour after taking the pill, when a plentiful ſweat broke out, which continued until near eight o'clock in the morning, when the other pill was given, and he drank freely of the nitrous mixture. His pain was much abated, and his pulſe ſoft and regular. Throughout the day, he took frequently of the mixture, and a free perſpiration continued until next morning. He got up about noon, free from pain, the ſwelling much abated, with a ſmall diſcharge from the urethra. He wore a ſuſpenſory truſs about a fortnight, when, by the moderate uſe of the ſolution of mercury, he was perfectly freed from all his complaints, only the epididymis remained hard, but not painful.

But when the ſwelling proceeds from a latent venereal taint in the habit, though not attended with ſuch acute pain, yet it is generally longer before a radical cure can be effected.

effected. In plethoric habits, moderate evacuations may be neceſſary, previous to the uſe of mercury, which, in this caſe, may be rubbed in liberally; at the ſame time that the bark is given. When it is attended with great pain, I have always found ſpeedy relief from the pill of opium and antimony, with the camphorated emulſion, given as in the preceding caſe. If practicable, a diſcharge from the urethra, ſhould be brought on, which has always a good effect, in producing a radical cure. In theſe caſes, a *ſufficient* quantity of mercury ſhould be uſed, otherwiſe, an effectual cure cannot be expected. The decoction of ſarſaparilla may be given with advantage, and ſhould be continued for ſome time after the ſwelling is reduced.

A waiter at a tavern in town, who, from his own account, had for ſome years been ſeldom free from a venereal complaint, applied to me for a ſwelled teſticle, which was attended with very little pain: he told me, that he had taken, and injected, the balſam of copaiva for a clap, which he had contracted about two months before, which ſtopped the running in a few days, and he thought

thought himſelf cured. I attempted to bring on the diſcharge, by a ſuitable injection; but as it was not ſo ſoon accompliſhed, as he wiſhed, he contrived to get a freſh infection, which had the deſired effect. By promoting the diſcharge for about a fortnight, and rubbing in the mercurial ointment on the ſcrotum and thighs, with the conſtant uſe of a ſuſpenſory truſs, the teſticle was reduced to its natural ſize; and he was cured of his gonorrhœa in a few days, by proper mercurial injections.

The above caſe, with the *method* he took to bring on the running, is related, only to ſhew the pernicious conſequences of ſtopping the diſcharge, in a virulent gonorrrhœa, *before* the venereal virus is ſubdued by mercury; and alſo to demonſtrate the ſpeedy relief obtained from its reproduction, whereby the tumor of the ſcrotum gradually ſubſided.

SECTION

SECTION VII.

Of Buboes.

THE venereal Bubo *generally* happens in a *recent* diſeaſe, and is occaſioned by the acrimony of the infected lymph, which, by its ſtimulus, affects the inguinal glands, through which it ſhould paſs. But it *ſometimes* ariſes from the whole habit being infected.

Though frequently many weeks elapſe, after the infection is received, before this ſwelling makes its appearance, yet that is not ſufficient to determine, whether it ariſes from a confirmed lues or pox, without other concomitant ſymptoms, indicating, that the whole maſs of fluids are infected.

The moſt frequent cauſe of a venereal bubo, ariſes from an improper method of treating the virulent gonorrhæa; as when the morbid diſcharge is prematurely ſuppreſſed; or from the uſe of irritating applications, where thoſe ſymptoms of venereal infection appear, ſuch as chancres on the glans, and præpuce, *without* any running. It may alſo be produced, by the indiſcretion

cretion of the patient, by cold, too much exerciſe, or intemperance.

Buboes have been diſtinguiſhed by ſome authors, into three kinds; the inflammatory, the œdematous, and the ſchirrous. This difference in their appearance, ſeems as much to depend on the patients habit of body, as the nature of the venereal poiſon. The length of time before any ſwelling is perceived in the groin, may probably depend on the different degrees of malignity of the venereal virus; as well as on the method of treatment purſued for its cure. Having frequently obſerved, that when the running in a gonorrhœa has been prematurely ſuppreſſed, and mercury too *freely* adminiſtered at the ſame time, a bubo is generally the conſequence. It may be no improper hint to thoſe who are inclined to uſe aſtringent injections, in a recent infection, to be cautious how they give mercury, or ſtrong heating medicines, while ſuch injections are employed.

It has been obſerved, that the poiſon, which is communicated by the bite of a mad dog, has remained inactive many months, and ſometimes a much longer

time, before it has ſhewn any ſymptoms of malignity, which has been attributed to want of ſufficient ſtimulus in the poiſon, to excite abſorption; may we not aſcribe to the ſame cauſe, a ſimilar effect, in the caſe of a venereal bubo? But as the *particular* manner in which the venereal virus acts, is imperfectly underſtood, we may be leſs ſolicitous about its *particular* mode of affecting the parts, ſo long as we know the effect it produces, and how to ſubdue them.

As a ſwelling in the groin may proceed from *other* cauſes, that are not venereal, it is very neceſſary to be *certain*, whether it is occaſioned by *venereal infection*, or not, before we undertake its treatment.

The cauſes it may ariſe from, are,

1. A hernia inguinalis, or bubonocele.

2. One of the teſticles remaining in the groin.

3. A tumor formed by the abſorption of acrid matter from an ulcer.

4. From an obſtruction in the inguinal gland.

5. An aneuriſm of the crural artery.

1ſt. A hernia inguinalis is known from the form and poſition of the tumor, as it is

not

not a circumſcribed or detached ſwelling, but is felt quite up to the ring of the abdominal muſcles, where the ſpermatic veſſels paſs down from the belly, like a ſtalk; whereas one indication of its being venereal, is, the patient having venereal ſymptoms, as a gonorrhœa, chancres, &c. previous to the ſwelling, ; a ſtiffneſs or ſlight pain in the groin is generally felt a day or two before its appearance; it is alſo hard, and circumſcribed. When recent, it is incompreſſible, and free from any connection with the ſpermatic proceſs; and when it is in a ſtate of ſuppuration, the difference between matter, and a piece of gut or cawl, is eaſily diſtinguiſhed by the feel.

2d. When one of the teſticles is detained in its way to the ſcrotum, it lies acroſs the the groin; and on examination no teſticle will be found in the ſcrotum on that ſide.

3d. Every ulcer ſituated in the lower extremities, which furniſhes ſharp acrid matter, *may* occaſion inflammation and ſwelling of thoſe glands, to which the lymphatics lead. When it is produced by the acrid diſcharge of an ulcer in the lower extre-

extremities, the *inferior* glands in the groin are moſt commonly affected; but when venereal, the *ſuperior* ones become enlarged.

4th. The lymph ſometimes accumulates from an obſtruction in the inguinal glands, and gives the appearance of a venereal bubo. This may proceed from the viſcidity of the lymph, as well as from ſome of the ducts or veſſels which compoſe the gland, being obliterated from preceding inflammation. In this caſe, the limb below becomes œdematous; and if from diſtenſion the gland burſts, the diſcharge is *lymph*, not *matter*. In this caſe, ſome of the lymphatic veſſels will frequently dilate and carry it off, eſpecially if aſſiſted by dry friction of the parts, as varied motion is found to have particular influence on the glandular ſyſtem.

5th. An aneuriſm of the crural artery is eaſily diſtinguiſhed, by applying the finger to the ſwelling, where a conſiderable pulſation is felt. As a miſtake of this kind is ſaid to have happened in this metropolis, this caution is the rather neceſſary, as an inciſion (through miſtake) would be attended with the moſt fatal conſequences.

It has already been obſerved, that the lymphatic veſſels *ſometimes paſs* the inguinal glands, *without entering them*; though it is rare and uncommon, yet it ſhews the *poſſibility* of the infection being carried into the ſyſtem, *without* the gland in the groin being affected. Therefore the general rule, that the inguinal glands are *always* affected, ſo as to give ſufficient previous notice of the infection puſhing its way into the habit, muſt be cautiouſly received.

With regard to the method of cure, practitioners differ in opinion, whether it is better to diſperſe, or bring the tumor to ſuppuration. This muſt be determined by circumſtances.

When a venereal bubo appears ſoon after the infection is received, attended with a diſcharge from the urethra, I have frequently experienced, that it may be diſperſed with the greateſt ſafety, provided proper methods are taken to ſecure the general maſs of fluids from infection.

But when it ariſes, without any other ſymptom of venereal infection, or is not accompanied with a diſcharge from the urethra, it will be more prudent to attempt

a ſuppuration, and evacuate the contents of the bubo.

I know, it is the opinion of ſome eminent practitioners, that when a venereal bubo is brought to ſuppuration, and opened at a proper time, that the venereal poiſon is *entirely* evacuated, together with the contents of the bubo; but if a mercurial courſe is not purſued at the ſame time, this opinion may be productive of diſagreeable conſequences. I muſt aſſure my readers, that within theſe ſix months, three perſons found it neceſſary to apply to me for want of proper care having been taken to ſecure the habit, *after* the bubo *had been opened*, and its contents diſcharged. It is true, that in one of the three this might be owing to the want of a ſufficient diſcharge.

When we have reaſon to ſuppoſe the complaint is local, and mean to diſperſe the tumor, if attended with a running it ſhould by no means be ſuppreſſed; and if the patient is of a plethoric habit,

habit, or the ſwelling is painful, bleeding ſhould be directed early and liberally; and when the habit is bad, recourſe muſt be had to ſuch evacuations, as particular ſymptoms may require; in general, the mildeſt laxatives will be found to anſwer beſt, which ſhould be repeated occaſionally, until the pain and other inflammatory ſymptoms are abated. Where there is no diſcharge from the urethra, or it has been prematurely ſuppreſſed, theſe evacuations ſhould be freely made, and frequently repeated, together with nitre, and plentiful dilution. If the patient is deſirous to expedite the cure, and prevent the formation of matter in the gland, beſides the uſe of antiphlogiſtic remedies, a ſtrict obſervance of low diet and regimen, are indiſpenſably requiſite, as well as to abſtain from all kinds of exerciſe. Should the pain in the groin be very ſevere, I have obſerved very ſpeedy relief obtained by the application of leaches.

When the ſwelling and pain are in ſome meaſure abated, we muſt have recourſe to mercurials, which ſhould be uſed freely,

ſo

ſo as to ſubdue the venereal poiſon, in the moſt ſpeedy and effectual manner.

In a variety of theſe caſes, I have found no method anſwer ſo well, as inunction, by rubbing the ointment on thoſe parts of the thighs, where the ſuperficial lymphatics paſs before they enter the inguinal glands.

It does not appear a circumſtance of the conſequence generally ſuppoſed, that the ointment ſhould be applied to *particular* parts of the legs and thighs, ſince the lymphatics are univerſally diffuſed over the ſurface of the body. Inoculation illuſtrates this fact, for to whatever part the matter is applied, the abſorbent veſſels take it up and convey it into the blood.

Inunction is generally directed in the evenings; for what reaſon, I am at a loſs to determine, for, abſorption is ſtronger in the morning, not from inanition, but becauſe the body has been recruited during reſt.

On the ſuppoſition that mercury ſubdues the venereal diſeaſe, by coming in immediate contact with the infection; may not the method of treating local complaints by inunction

unction, where mercury is applied more *immediately* to the affected part, be found more effectual on that account? by ſuch means it is not liable to undergo any changes, whereby it might be deprived of its ſpecific power, which may probably in ſome degree, be diminiſhed in the long round of circulation, when inwardly adminiſtered. The advantages obtained from its external uſe in *certain local* venereal complaints, will appear obvious, when it is conſidered, that if it is adminiſtered internally, it is firſt taken up by the lacteals in the inteſtines, whoſe orifices are ſo ſmall, as to be imperceptible to the naked eye. It is carried to the meſenteric glands, and from thence to the loins, where it mixes with the lymph, which comes from the lower extremities and genitals, in one common trunk, called the thoracic duct, which receives the contents of the lacteals, and lymphatic veſſels of the lower extremities and abdominal viſcera; in this duct it is carried upwards, paſſing behind the aſcending aorta, and terminating in the angle, (on the left ſide) between the jugular and ſubcla-

vian vein, near where the collar bone and firſt rib are inſerted into the breaſt bone. *It is here, and not before,* where the mercury, internally taken, mixes with the blood, and then partly goes the round of circulation, before it gets to the affected gland in the groin. But notwithſtanding this long courſe, repeated experience convinces us, that when ſuch preparations as are adapted to the ſymptoms, are properly given by the mouth, the cure is both ſpeedy and effectual. Certainly then, the more minutely the mercury is divided, the greater probability there is of its being carried with greater efficacy to thoſe diſtant parts of the body; from which we may infer the ſuperior efficacy of the mercurial ſolution before mentioned.

When a bubo appears ſome months after the infection is ſuppoſed to have been received, and is not attended with any diſcharge from the urethra, it is certainly prudent to bring the tumor to a ſuppuration, that we may more effectually eradicate the venereal poiſon, by evacuating the contents of the bubo. By this ſalutary drain, leſs mercury will be required to perfect a cure, which

which may be uſed *internally*, in ſuch quantities, as will, with proper regimen and diet, promote a complete and ſpeedy ſuppuration.

In order to promote and quicken the maturation of the tumor, topical applications are generally found requiſite: To anſwer this purpoſe, warm fomentations, with a poultice of bread and milk or lintſeed meal is generally ſufficient. Whatever application is deemed proper to promote ſuppuration, ſhould be applied as warm as can be endured, and removed as often as it becomes cold. But where ſecrecy may be neceſſary, or hot poultices not eaſily procured, I have found the following cataplaſm anſwer as a good ſubſtitute, if the part is well fomented and kept warm by proper covering.

℞. Mel ℥iij
Ung. gum. elemi ℥ij
Terebinth. venet. ℥ſs bene miſcean-et adde
Farin. tritici q. ſ. ut. ft. cataplaſm emol.

This

This ſpread pretty thick on tow or linen rag, ſaves much trouble in making poultices, and is a good ſuperficial dreſſing to promote a free diſcharge after the bubo is opened.

The ſuppuration being completed, which is known by the ſoftneſs of the tumor and fluctuation of matter under the finger, it ſhould be opened, rather than ſuffer it to burſt of its own accord, as the aperture through which the diſcharge is made, is generally too ſmall, and not often ſituated in the moſt dependent part.

Therefore care ſhould be taken, that the opening be made ſufficiently large, and alſo in a proper direction, ſo as to allow the matter to have a free exit. When the contents are ſufficiently diſcharged, lint is the beſt application, as it anſwers every intention, and at the ſame time lies ſoft on the part without occaſioning pain; it abſorbs all ſuperfluous moiſture, and haſtens the formation of pus, or that glutinous matter, in which the new veſſels are explicated. Previous to each dreſſing, warm fomentations, will be found ſerviceable. At firſt over the lint may be

applied

applied a pledgit of the digeſtive already mentioned. In order to cleanſe the ulcer, it is a common practice to uſe detergent applications, ſuch as precip.rub, alum. uſt. &c. we are not to imagine, that ointments loaded with thoſe eſcharotic ingredients will always diſpoſe the parts to heal ſooner, as generally ſpeaking, nature is ſufficient for this purpoſe, except in ſome very ſhattered conſtitutions, where the bark, with a proper diet, are chiefly to be depended on; and mercury ſhould now be uſed, in ſuch quantities, as to ſecure the conſtitution from the effects of any of the morbid fluid, which may have got admittance into the general circulating maſs.

By theſe methods, we clear the habit of all infection, nor will it ſeem ſurpriſing that this diſcharge ſhould rid the conſtitution of the venereal poiſon, when it is obſerved, that in the plague itſelf, a ſuppuration in the glands of the neck, arm pit, or groin, will prove a perfect criſis.

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SECTION VIII.

Of Chancres.

When chancres ariſe from a freſh venereal infection, they are generally ſeated on thoſe parts, which have a thin and tender covering, as the glans penis, or inſide of the præpuce near the corona glandis; but they particularly affect thoſe parts, where there is any crack or excoriation. They appear at firſt, like ſmall pimples, attended with itching, but ſoon degenerate into corroding ulcers. They are known to be venereal, from a ſlough at the bottom, of a yellowiſh white colour, and by having hard callous edges. When *recent*, they are not uſually attended with difficulty in the cure, eſpecially if they happen to perſons of a healthy habit. Although theſe ulcers may in moſt caſes be healed by external applications, yet it is never prudent to truſt to them alone. When there is pain and inflammation, they often occaſion a phymoſis, which is more tedious in

in the cure, from the difficulty of applying proper applications.

On the 7th of June 1777, a gentleman applied to me for a painful ſwelling of the penis, which had prevented him getting any ſleep for ſeveral nights. On examining the parts, I found the præpuce ſwelled to three times its natural ſize, and ſo cloſely contracted round the glans, that although there was a copious diſcharge, we could not diſtinguiſh from where it flowed, but from the pain it ſeemed to proceed from chancres which were under the præpuce on the corona glandis.

Notwithſtanding he was bled plentifully, and gentle laxatives adminiſtered, with warm fomentations and emollient poultices; the pain and ſwelling continued for two days, nearly as bad as ever. He was ordered to bed, and anodynes were liberally given, which brought on a free perſpiration, for twenty four hours, after which the ſwelling was much abated, and I was able to throw up an injection betwixt the glans and præpuce, which immediately abated the pain. By continuing the injections with warm ſomentations and poultices, he was

able

ſible to draw back the præpuce, which diſcovered three deep, ill conditioned ulcers. By mild mercurial preparations, topically applied, with gentle laxatives, the chancres were healed, and the parts were reduced to their natural ſize, in leſs than a fortnight. He continued the uſe of a diet drink, with the mercurial ſolution, for ſix weeks longer, and got perfectly well. From the firſt time of uſing the preparation for the heat of urine, the pain entirely ceaſed, and never returned.

In women, when the infection is received by coition, theſe ulcers are ſituated on the inſide the labia, and ſometimes upon the clitoris and its covering or præpuce. I have remarked, that women are more liable than men to that ſpecies of venereal infection, which happens without a diſcharge. When it is a *primary* complaint, it is cured with as much eaſe, and certainty, as in the male ſubject; but mercurials ſhould be uſed, either internally, or by unction, otherwiſe a radical cure cannot be expected.

A gentleman applied to me laſt ſummer, in behalf of a female friend, who had a

ſmall